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FACSIMILE TRANSMISSION COVER SHEET

Date:

December 28, 2004

To:

United States Patent and Trademark Office

Examiner: Thomas L. Dickey; Art Unit: 2826

Fax:

(703) 872-9306

Re:

Application Serial No.: 10/057,731

Filing Date: 1/24/2002; First Named Inventor: Janesick, J.

Attorney Docket No.: 01901071

From:

Farjami & Farjami LLP

Number of pages including the cover sheet: 21

Message:

Enclosed please find the Response to the Final Office Action dated November 3, 2004 and six (6) drawings Replacement Sheets.

Thank you.

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Attorney Docket No.: 01901071

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Janesick, J.				
SERIAL NO.: 10/057,731 FILED: January 24, 2002				
FOR: Imager Cell With Pinned Transfer Gate				
Mail Stop AF HONORABLE COMMISSIONER FOR PATENTS P.O. Box 1450, Alexandria, VA 22313-1450				
Sir/Madam:				
Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.				
☑ No additional fee is required.				
☐ The fee has been calculated as shown below:				
□ EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE	
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$	
SECOND MONTH AFTER TIME PERIOD SET 450.00 \$				
THIRD MONTH AFTER TIME PERIOD SET 1,020.00 \$ 510.00 \$				
FOURTH MONTH AFTER TIME PERIOD SET 1,590.00 \$				

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

,	Column I	Column 2	Column 3	********		
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	48	MINUS **71	* = 0	x 50	x 25	\$
INDEPENDENT	6	MINUS ***9	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
- ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
- *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

		Attorney Docket No.: 01901071		
	Total fee for Supplemental Ini	formation Disclosure Statement \$		
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Date: _	12/28/04	By: Michael Farjami, Reg. No. 38,135		
Farjami 26522 I Mission Telepho	I Farjami, Esq. & Farjami LLP .a Alameda Ave., Suite 360 I Viejo, CA 92691 one: (949) 282-1000 le: (949) 282-1002	CERTIFICATE OF FACSIMILE TRANSMISSION 1 hereby certify that this correspondence is being filed by facsimile transmission to United States Patent and Trademark Office at facsimile number 703-872-9306 on the date stated below. The facsimile transmission report indicated that the facsimile transmission was successful.		

Attorney Docket No.: 01901071

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THIRD MONTH AFTER TIME PERIOD SET 1,020.00 \$ 510.00 \$						
FOURTH MONTH AFTER TIME PERIOD SET 1,590.00 795.00 \$						
☐ TOTAL EXTENSION FEE \$ 0.00						

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Date:	12/28/04	By: Michael Farjami, Reg. No. 38,135
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Farjami & 26522 La Mission Telephor	k Arjami LLP & Farjami LLP & Alameda Ave., Suite 360 Viejo, CA 92691 le: (949) 282-1000 :: (949) 282-1002	Name of Person Performing Facsimile Transmission
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